PTO/SB/01 (10-01)

App or use through 10/31/2002. OMB 0651-0032

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	Attorney Docket Number	BS-0001	
DECLARATION FOR UTILITY OR DESIGN	First Named Inventor	Maze, Gary R.	
PATENT APPLICATION	COMPLETE IF KNOWN		
(37 CFR 1.63)	Application Number		
Declaration Submitted OR With Initial Filing Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Filing Date		
	Art Unit		
	Examiner Name		

T ming	required)	Examiner Name		
As the below named inventor, I hereby declare that:				
My residence, mailing address, and c	itizenship are as stated belo	ow next to my name.		
I believe I am the original and first inv	entor of the subject matter w	hich is claimed and for which	ch a patent is sougl	ht on the invention entitled:
SYSTEM AND METHO		GEMENT OF DIS	TRIBUTED	
PERSONALIZED INFOR	RIMATION			
	,			
	(Title of the li	nvention)		
the specification of which				
is attached hereto				
OR [
was filed on (MM/DD/YYYY)		as United States A	pplication Number	or PCT International
L				
Application Number	and was amende	ed on (MM/DD/YYYY)		(if applicable).
		`		
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.				
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT				
international filing date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant				
breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant				
breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.				
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO
,				
Additional foreign application nu	Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:			

[Page 1 of 2]

DECLARATION — Utility or Design Patent Application

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Direct all correspondence to: or Bar Code Lal	pel		OR Corr	respondence address below
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I hereby declare that all statements made herein of my are believed to be true; and further that these stateme made are punishable by fine or imprisonment, or both, validity of the application or any patent issued thereon.	nts were made wit	h the kn	owledge that willful false	statements and the like so
NAME OF SOLE OR FIRST INVENTOR :	A petition h	nas bee	en filed for this unsigr	ned inventor
Given Name Gary Robin		Family	y Name Maze	
(first and middle [if any])		or Su		
Inventor's Signature				10/26/2001 Date
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City	State		ZIP	Country
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Inventor's Signature Mulus Janus Churz Date 18/24/01				
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Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.				

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

A Li Ai Ai Ai Li		
Application Number		
Filing Date	24 Oct 01	
First Named Inventor	MAZE, GARGE.	
Title		
Group Art Unit		
Examiner Name		
Attorney Docket Number	35-0001	

I hereby appoint:				
Practitioners at Customer Number OR Place Customer Number Bar Code Label here				
Practitioner(s) named below:				
Name	Registration Number			
GARY R. MAZE	92831			
as my/our attorney(s) or agent(s) to prosecute the application ide	entified above, and to transact all			
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l am the:				
Applicant/Inventor.				
□ A :				
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37/CFR 3.73(b) is enclosed. (Form PTO/SB/96).				
	- All All All All All All All All All Al			
/ SIGNATURE of Applicant or Assignee of Record				
Name Hun Allin				
Signature DANAL Schnitzer				
Date 10/39/01				
NOTE: Signatures of all the inventors or assignees of record of the entire interest or forms if more than one signature is required, see below*.	r their representative(s) are required. Submit multiple			
*Total of forms are submitted.				

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